

THE

BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. XLI.

WEDNESDAY, JANUARY 30, 1850.

No. 26.

MEDICAL EVIDENCE IN A CASE OF ALLEGED DEATH FROM CHLOROFORM.

ROBERT MITCHELL, an omnibus and cab driver, 43 years of age, died at his house, in Hall's Court, Hunslet Lane, Leeds, Eng., on the 25th October, and was interred two days afterwards. The deceased had been a man of intemperate habits, and last year he had a severe attack of delirium tremens, from which he recovered under the treatment of Mr. Joseph Teale, surgeon, of that town. Subsequently he was induced to abstain from all intoxicating drinks; but unfortunately for himself, about a fortnight before his death he had again reverted to his former habits, and by excessive drinking brought on another attack of delirium tremens, for which he was again treated on the 20th of October, by Mr. Joseph Teale, who attended him up to the time of his death.

Mr. Joseph Teale, Surgeon, said:—I first saw the deceased on the Saturday before his death. It was the 20th of October. He called upon me with his wife. He was at that time under symptoms of delirium tremens. I prescribed for him, and saw him again on the Monday, when he called upon me. At that time he was still under symptoms of delirium tremens, but not worse. I gave him medicine, and saw him on the day following at his own home. He was in bed, and appeared to be worse; he talked incoherently, but sensibly on some subjects. I did not then think it necessary to put him under any restraint. I saw him again on the morning following; he was in bed still, but getting more into a state of confirmed delirium tremens. I did not think it necessary to put him under restraint, but wished him to be watched, and told them to have strong men in the house in case he should become worse. I saw him again on the Thursday morning, when he was in some respects worse; there was less power in the pulse, but he was perfectly manageable. I saw him again at the Court House, at about a quarter to 8 in the evening; he was then very much exhausted, and I ordered him home. He undressed himself with my assistance, and got into bed with a little persuasion; he got into bed under an impulse. He wanted to take charge of his horses first. When he got into bed I found the pulse so exceedingly weak, that I feared sinking was taking place. No doubt this feebleness had been brought on by the previous attack, and finding also that other treatment had com-

pletely failed, and that he was sinking rapidly, I determined to apply chloroform. I had previously applied a blister to the back of his neck, and had given him opium and morphia. As these remedies had failed in doing good, and having had conversation with other medical men, I decided upon putting him under the influence of chloroform. The man appeared to me to be sinking, and I was afraid to follow the opium treatment further; therefore I applied the chloroform. There are different strengths of chloroform. What I used was from Dublin. I poured a teaspoonful, about a drachm, upon a towel doubled in four, and applied it by degrees to the nose and mouth. This application would continue about two minutes. The immediate effect was to tranquillize the deceased, and the pulse gradually improved. This continued four or five minutes; then I waited a little, and found the man getting more violent; and as his violence increased, his pulse decreased. He had a spasmodic affection, or twitching of the face, neck and arms, which would be produced by the chloroform. The pulse got weaker as he became more violent, and I applied the same quantity of chloroform again, which produced the same results. I waited until the effect of the second application had been produced, and then raised him up in bed, and he swallowed some brandy and water. Between the first and second application of chloroform we applied the hand-cuffs, for he was so very violent, and being a strong, powerful man we could not hold him. I think I did not apply it a third time; the second might be applied at two little intervals. I was with him three quarters of an hour at his own house; he was quieter when I left him, and the pulse stronger. I did not at that time apprehend his immediate death; but in delirium tremens they often die from syncope. I left directions for him to be watched closely, promising to see him again in two hours, but in the meantime he died. It is customary to administer chloroform in such cases, and it is recommended by the faculty; there are several cases in the books, and all successful ones. In cases where there is a tendency to diseased brain or apoplexy, and the treatment of opium or morphia cannot be carried further, then we administer chloroform.

By a Juror.—I have seen chloroform applied locally in experiments, but not to the human subject in delirium tremens.

By the Coroner.—I applied it by degrees, putting it closer and closer till it produced the effect I wished.

Mr. Samuel Smith, senior surgeon of the Leeds Infirmary, said—Last evening, in conjunction with Mr. Price, I examined the body of this man. We first noticed that the face and the head were enormously swollen and black. There were vesications from the separation of the cuticle, on the chest, arms, body, and lower extremities, and considerable blackness on several parts, indicating that decomposition was going on. We divided the integuments on the head, and separated the scalp from the skull, in doing which a large quantity of dark serum was discharged. The skull-cap was removed, and we then noticed that the brain was much decomposed, pulpy and brown, particularly towards the base; there was no unnatural appearance in the lateral ventricle of the brain. We then opened the chest. We found the lungs dark

colored, congested and collapsed; the superior lobe of the right lung had an old adhesion to the pleura, and in the left lung there was a more recent adhesion. We then opened the pericardium, or bag containing the heart. There was no effusion in the pericardium; the heart was small for a man of that bulk, flaccid, pale, and empty. The coating of the heart and the valves of the great vessels were in a natural state. We then opened the windpipe. The mucous membrane of the trachea and larynx was of a reddish brown and highly congested. This we traced down to a division of each side of the chest. We then examined the contents of the abdomen. We found the liver in a healthy condition, with the gall-bladder full of bile. The stomach was empty, and we noticed no unnatural appearance in it. The remaining abdominal viscera appeared to be in a healthy state, and loaded with fat. I could not give an opinion as to the cause of death from this appearance, in consequence of the state of the body preventing a more minute examination, unless I combine these appearances with what I have heard of the case. There was nothing we could see on the brain to account for death; no effusion, no clot of blood, no rupture; but then we could not, in the state of the brain, make a sufficiently minute examination. The state of the trachea and lungs, and the collapsed state of the heart, I should attribute to the combined effects of delirium tremens and chloroform. I should not have expected to have found the lungs and mucous membrane of the trachea in this state from delirium tremens. Having heard all the evidence, I confess myself unable to give a distinct and decided opinion on the case; but I think it probable the appearance of the lungs and of the mucous membrane of the trachea may have been caused by the inhalation of chloroform, and these appearances, along with the state of the heart, might account for death. The heart was empty. I cannot give a decided opinion as to the cause of death. Having heard the statement of Mr. Teale as to the state of the body at the time, I consider it was prudent to administer chloroform in the way described; I should have administered it myself after failure of other remedies, in a similar case of treatment by opium. I would not, as a general proposition, in the treatment of delirium tremens apply chloroform. It is the recommended, but not the established, practice, and therefore I should think myself justified in administering chloroform in a case where I had failed in giving relief by the ordinary means. If, as Mr. Teale says, he had been trying the ordinary treatment, and without effect, he was justified in applying chloroform; and that practice would have been approved by the heads of the profession in this country. Patients generally resist the application at first; it will produce a choking sensation sometimes. I should think, from the statement that the deceased tried to put it away with his hand, that Mr. Teale administered it properly. Convulsions sometimes take place before chloroform produces a tranquillizing effect; and sometimes these appear very frightful. The heart might be empty if the man had died suddenly of syncope. I have seen chloroform administered in hundreds of instances in this town, but I never heard of any case in which it was supposed death had been caused by it. Chloroform operates differently on different persons. I have heard patients

in the full glee of singing a comic song whilst under the most dreadful operation. If I was to give my opinion, I should say the man has died from a combination of delirium tremens and chloroform. I should not like to say the man has died of chloroform, but I think it probable that he might not at this time have died of delirium tremens if it had not been administered. If I was giving a description of the cause of death for registration, I should say he died of delirium tremens, giving the number of days under treatment. We examined every cavity as far as we could in the state the body was in.

By a Juror.—It is possible that leaving his bed, in the state described, and going to the Court House, might have accelerated his death.

By another Juror.—Mr. Teale appeared to have administered chloroform after every other means had failed. I should have done so myself, although, of course, I should be cautious after this case.

Mr. Teale said the man had been previously laboring under bronchitis, which might account for the discolored appearance of the trachea.

Mr. Smith said he was not aware of this, and it might account for discoloration.

Mr. Wm. Price, surgeon, said—I quite agree with the statement of Mr. Smith with reference to the *post-mortem* examination. The appearances we found—I allude to the windpipe, the lungs, and the heart—had I not heard the other evidence, I should say had been produced by some powerful means suspending vital action. I find the same appearances were observed in fatal cases from the use of too large a quantity of chloroform. I should lean very much to the opinion of Mr. Smith as to the combination of causes, because I could not account for the appearance of the section solely from the effect of delirium tremens, but such appearances have been observed after too large a dose of chloroform. To a person inclined to syncope, a dose might be fatal which would produce no ill effect upon a person not so predisposed. This shows it should be used with caution. I never would use chloroform in delirium tremens without consultation; then I probably should be led to use it. Under all the circumstances, I should think that chloroform failing to effect the relief it was expected to have done, that, in combination with delirium tremens, has produced death. If I was giving a certificate to the registrar I should say that he died of delirium tremens, which was the principal disease, for though in the state he appears to have been, if chloroform had not been administered he might have lived a little longer, yet probably a few hours would make all the difference.

A Juror wished other medical gentlemen to be asked whether they had known chloroform administered in delirium tremens.

Mr. Price said it was in accordance with the proposed practice, but not adopted generally.

By a Juror.—A teaspoonful is the usual dose.

Mr. Teale suggested that Mr. Samuel Hey, who had had a similar case, should be examined.

Mr. Samuel Hey, surgeon, said—I have been present during almost the whole of this examination. My opinion is that the practice adopted by Mr. Teale is such as I should have followed had I been consulted,

and such as I have adopted. I have used chloroform in one case of delirium tremens, which was quite as extreme as this, and with success. I applied a larger quantity than that said by Mr. Teale to have been used. I have known it given with very great success in other cases. I consider, after other remedies have failed, it is giving the patient the last chance. It is a curious fact, that in delirium tremens the virulence continues while the pulse fails. In the case I treated, the patient was extremely violent, and we held him down and gave him the chloroform. The spasmodic convulsions were very violent, and he had an epileptic fit at the time, but if he had died under the application, we should have applied it, for he had no other chance of life. After a while he slept about twenty-four hours, and to revive him we gave him some brandy, and he quite recovered. Opium treatment had been carried as far as it could safely be done, the patient having been five days under the attack. Mr. Teale saw this case for me in the first instance, in consequence of my being out of the way at the time; it was a very striking case. I consider it was justifiable to use chloroform in such a case, though the man might have died, as it was giving him the last chance.

The Coroner, in commenting upon the evidence, said the only question for the jury to decide was, what was the cause of this man's death; and in deciding that, they would have to be guided by the evidence of the medical gentlemen. As regarded Mr. Teale, all he did was with the best intention. He had bestowed as much pains as he possibly could, applying first the usual remedies without any good effect, and then, without any want of ordinary skill and care, he applied chloroform to the patient, who died shortly afterwards. According to all the evidence given, death resulted from delirium tremens combined with the application of chloroform; but the leading cause was the former. With respect to the use of chloroform, as on every other point, there would be differences of opinion, but it was in evidence that the use of it was approved of, and it had been successfully adopted by Mr. Hey in a specific case. True, Mr. Price said he would not adopt it without consultation, and, therefore, if he erred at all, it was on the side of caution; but he did not say he would not apply it in such a case. Under all the circumstances it did appear to him that no blame was attached to Mr. Teale or to any body else, and the only safe and proper conclusion the jury could come to was, that the man had died of delirium tremens.

The jury conferred together for a short time, and then the foreman stated that they were unanimously of opinion that the deceased had died from delirium tremens; and they thought it due to Mr. Teale to state that in their opinion he had adopted the proper and necessary remedies.—*London Medical Gazette.*

REMARKABLE CASE OF MONOMANIA.

REPORTED BY C. H. NICHOLS, M.D., PHYSICIAN TO THE BLOOMINGDALE ASYLUM, N. YORK.

ON the 10th of October, 1849, Charles Sprague was tried on an indictment for highway robbery, and acquitted on the ground of insanity;

the trial taking place before a Court of Oyer and Terminer of King's County, N. Y., held in the City Hall of Brooklyn, Judge N. B. Morse presiding.

Deeming this case a clear one of irresponsibility on account of mental aberration, and one of at least as much psychological as forensic interest, it is not my purpose to give the particulars of the steps of this trial, but to make a suitable record of the history of a very singular case, of which its criminal relations are only an incident.

It may not be improper for me to state that I was present at this trial as an *expert*, and that I have derived all my knowledge of the case from the testimony of the witnesses examined on the occasion under oath.

The principal witness was the defendant's father, a clergyman of the highest respectability, whose testimony was corroborated in every particular by several other witnesses, indeed by all the Court thought it worth while to have brought forward.

Charles Sprague's paternal great grandmother, grandmother, great uncle, and three great aunts, being four out of a family of six, and a cousin, are or have been insane; a brother of his father is subject to fits of very excessive and apparently uncontrollable passion, and a sister of his has sudden paroxysms of intense groundless fear, and at such times is soothed with great difficulty.

When Charles was about 7 years of age he received upon his head a blow from a hoe, but it was not at the time supposed that the skull was injured; soon after this he fell from a height, bruising his head to some extent, and knocking out several of his teeth; and when past 12 he again fell from a balcony, striking in part upon his head, but the concussion was not at the time deemed alarming, for in the course of a few days after the accident he went out to his school and play, and appeared as well as usual.

In the course of the year succeeding the last fall, however, he began to complain at times of pain in his head, and when suffering from headache his friends observed, what his father describes as an unnatural prominence and dulness or glassiness of his eyes, and though the headache gradually wore away, this peculiarity in his expression continued to recur for years, at intervals varying from one week to several months, till it is now thought that there is a settled change in his eyes to greater prominence or convexity of the globe, than was the case in early boyhood. There has at no time been any unusual enlargement of the head or change in shape. Simultaneously or closely succeeding the first appearance of the occasional headache and strangeness in the expression of his eyes, there began to be developed a propensity of mind, or occasional conduct, of its kind most extraordinary and unaccountable.

The *shoes* of the female members of the family were from time to time missing under circumstances most surprising and inexplicable. It at once appeared that they could not have been taken for use, for, though both of a pair were sometimes lost, in the majority of instances only one was gone, and it was usually found about the house, having been thoroughly soaked in water, twisted up like a rope, and then hid away between the feather and straw-bed, or in the depths of a trunk, or hung

up in a clothes closet with garments hung about it on the same hook as if to conceal it.

After much fruitless inquiry respecting the perpetrator of this mischief, a servant girl was accused of it, but she firmly denied it, and there the matter rested for a time. It was not long, however, before a shoe was missing, under such circumstances as to render it quite evident that Charles had taken it and disposed of it in the manner before mentioned. When questioned upon the subject he hung his head and was silent, and he again and again repeated the act and was as often interrogated concerning it, but invariably with the like unsatisfactory result. After this mysterious habit had existed for a year or two, an attempt was made to break him of it by reproof of various kinds, and then he only broke silence in efforts to evade the subject, not to make any explanations regarding it. And at a later period he would wholly deny the possibility of his having taken a shoe as alleged, but for the last half dozen years he has said, when remonstrated with on account of his indulgence in a habit so singular and inconvenient, and the circumstances of the loss of a particular shoe stated, that he *must* have taken it, though he had no recollection of the act, and did not know what he wanted with it.

This habit of taking the shoes of females commenced at the time stated above, and has continued up to the present moment, without, it is thought, any intermission of more than three or four months duration. After the practice became established, his mother and sisters and the female servants in the family made it a point to place all their valuable shoes under lock and key; but notwithstanding their precautions he occasionally succeeded in possessing himself of them, and when a shoe was missed it was usually, sooner or later, discovered in some by-place about the house, having been wet and twisted or crumpled.

There was at one time a rumor in the family that this singularly-affected son had attempted to remove a shoe from the foot of a servant girl in the house; and on one occasion, hearing a loud scream in the middle of the night coming from the floor on which he and his sisters slept in contiguous bed-rooms, his father jumped from his bed, ran to his daughters' room, and was informed by one of them that Charles had been in their room, and without the aid of a light, turned the key of a drawer, taken out a pair of shoes which lay purposely concealed in a quantity of clothing, and then had come to the foot of her bed and pinched one of her toes. At this juncture she screamed, and her brother immediately dropped the shoes at the foot of the bed and repaired to his own room, where his father found him in bed.

This propensity continued to manifest itself in the manner now described, till in the early part of the present year two females residing in the city had each a shoe or shoes taken off her feet while walking in the street in the evening, but who the offender was in those cases was never known, nor is it now, but they are mentioned as being analogous to that about to be described, and it may be that one individual was concerned in them all.

Some time in July last, Mr. C. Sprague's wife recollects that she purchased a pair of shoes for a particular occasion, and when she wanted

them they had disappeared ; and though it was a riddle to her, it became evident to his father, who was then boarding with him, that their disappearance was due to the exercise of his old propensity.

In August last Mr. Sprague left his house immediately after breakfast to go to his business (that of a printer), and in a few moments after was seen walking towards his house instead of towards his office, for which he had set out, and to overtake a young lady, throw her down, snatch the shoe from one of her feet, and, on an outcry being made by several persons who were hard by, run away. The young lady wore a chain and locket and other jewelry in sight, but he did not offer to take anything from her person but her shoe, nor did he do violence to her person in any respect or degree. Running, he proceeded round a square, and on his way called at his wife's father's and asked if his father was in town, a matter upon which he was perfectly well informed, then left the house, came directly back to the very spot where he had just taken the shoe, and continued on without stopping to his place of business. He was soon arrested and taken before a magistrate, and when interrogated in regard to the shoe, he said he had changed his coat after going to the office, and that the shoe was in the pocket of the one he had taken off, where it was found. After the requisite process he was committed to prison to answer the charge of highway robbery, and on the return to the city of his father who was absent at the time of the unfortunate occurrence in the street, he was admitted to bail in the sum of \$5000, and on the 19th of October his trial took place, as stated at the opening of this paper.

The relations between Mr. S. and his father had always been particularly genial, frank and confiding, and when they met the first time some days after the robbery, the former burst into tears, and the following dialogue took place, which I give in detail, as indicating the state of the young man's mind during the commission of the act in question :—

" Well, Charley, this is the same old thing ?"

" Yes it is, father."

" What can you say about it ?"

(Charles, looking into his father's face with an expression of perfect ingenuousness and honesty) " Well, father, I don't know much of anything about it except what they (those who witnessed the deed) told me."

" You don't deny that you did it, do you ?"

" No, not at all."

" Tell me, my son, just what you do remember about it."

" I think I was going along in the street and caught sight of a shoe, and it flashed into my mind like lightning that I wanted it, and I dove for it."

" But what did you want with that shoe ?"

" I don't know what I did want with it."

" You know you have for years been in the habit of taking your mother and sister's shoes—what did you *ever* want with a shoe ?"

" I don't know, father, what I ever did want with one."

" How did you get the girl down ?"

" Don't know anything about it, only they told me I did get her down."

"Did you strike her or trip up her heels?"

"Don't know. *The whole affair is a kind of haze before my mind.* The first perfectly distinct recollection that I have of what took place that morning, is of being near the printing office after the affair with the young lady, about half a mile beyond where it occurred."

During the period which elapsed between Mr. S.'s arrest and final trial, his mind was at times so much agitated that his friends were not a little apprehensive of mental disease in its more common forms, and great pains were necessary to calm and soothe him, particularly in his anxiety respecting the issue of his approaching trial; and his old propensity was more active than for some time past. On one occasion his wife fell asleep while sitting in an easy chair, and when she awoke she perceived that one of the shoes, she was then wearing, had been taken from her foot during her sleep. Making immediate search of the person of her husband, who was present, she found the missing shoe tucked into the leg of one of the boots that he then had on. At another time missing one of her shoes, she sent a messenger to the office, where it was found in Mr. S.'s coat pocket.

Mr. Sprague's moral character has been singularly faultless, unless the propensity to take shoes be excepted. He has never been known to drink a glass of spirits, to use a profane word, or to keep vicious company. He has never been known to utter a falsehood in any other than a shoe case, or to take anything wrongfully except shoes. Nothing in his manner has ever afforded the least warning of the time of committing the acts in question, or betrayal of them after their commission. He has all his life resided either in his father's or brother's family, or kept house himself; and except the instance in the street, it is not certainly known that he has ever taken a shoe that did not belong to some member of the family of which he formed a part, and his friends are not aware that he has ever taken any but *women's* shoes. Of the hundreds of instances in which he has exercised this unique propensity, he has been *seen* to take a shoe only twice; once when he went to his sister's lodging-room at night, and took a pair of shoes hid in clothing contained in a locked bureau drawer, and again when he snatched a shoe from the foot of a young lady, in a broad open street, in the day-time, and in the presence of many spectators.

As it respects Mr. S.'s intellectual character:—Their father designed giving both his sons, this one and another a year or two older, a collegiate education; but it becoming quite apparent that study was neither attractive nor easy to Charles, though his inaptness for learning was by no means greater than is very common with minds whose integrity is never in the least suspected, the original design was abandoned, and, instead, after obtaining an education ample for business, he in accordance with his own wishes was bound as an apprentice to a printer. Pursuing his chosen calling uninterruptedly to the present time, first as an apprentice, and then as higher journeyman, he has uniformly maintained a high character for integrity, regularity of habits and general efficiency. As the only drawback on this commendation, it is stated that when much hurried with irregular and unexpected jobs, he is apt to become

confused, and is unable to proceed until his mind becomes collected by a short relaxation. Knowing that he inherited a tendency to nervous derangements, after the development of a propensity so objectless in any rational point of view, his father apprehended that his mind was not well balanced; but aside from the one particular described, there has never been any mental manifestation, or any habit, that would of itself have raised the suspicion of insanity.

Mr. S. is most respectably married, and has one child.—*American Journal of Insanity.*

SKETCHES OF EMINENT LIVING PHYSICIANS—NO. XV.

HUGH L. HODGE, M.D., PROF. OF OBSTETRICS AND DISEASES OF WOMEN AND CHILDREN
IN THE UNIVERSITY OF PENNSYLVANIA.

"Some angel guide my pencil, while I draw
What nothing less than angel can exceed,
A man on earth devoted to the skies;
Like ships at sea, while in, above the world,
With aspect mild, and elevated eye,
Behold him seated on a mount serene,
Above the fogs of sense, and passion's storm,
All the black cares, and tumults of this life,
Like harmless thunders, breaking at his feet,
Excite his pity, not impair his peace."

"Titles and honors (if they prove his fate),
He lays aside to find his dignity.
Himself too much he prizes to be proud,
And nothing thinks so great in man as man."—*Young.*

OUR profession has been charged, both by clergy and laity, with a species of irreligion which amounts almost, if not quite, to infidelity. Parents are warned against the study of medicine as a pursuit for their sons, on the score of the infidel tendencies of the profession. Cato opines that this feeling, or opinion, originates in the necessity which physicians are under, of avoiding the prejudices and preconceived notions of their patients. We are ministers to both body and mind; and if we were loud in our professions of sectarian faith, even where the denomination was the most numerous and popular, we must of necessity wound the feelings of some whose sentiments and education were different. The Jew and the Greek, Catholic, Protestant, and Unitarian, are all the same on a bed of sickness; and the soothing hand and words of kindness, hope and consolation, or the medical properties of drugs, act equally, upon the high and the low, the rich and the poor, the learned and the unlearned, infidel or christian. The consequence of this position in society is a proper neutrality, in all things which may interfere with the effectual and successful practice of our noble art, which has been very appropriately termed "christianity in action."

When we recollect, however, that such men as Haller, Boerhaave, Good, Rush, and the like, have been distinguished not only as physicians, but as professing and practical christians, the assertion or insinuation, that the profession is an infidel one, should be indignantly repelled, by the strongest of all arguments, facts. If the definition of a christian

given in St. James be any criterion of who is one, then are physicians generally christians, in the scripture sense of the term.

The subject of our "sketch" to-day is no exception to the rule, but in fact presents an instance in which, by general consent, the christian virtues shine with peculiar lustre. Left an orphan at an early age, with only a lone and loved pious mother to care for him (and who ever became anything without a good mother?), he early felt the necessity of practising those pure principles which she had instilled into his young mind. It seems that, like Mrs. Rush, the mother of Dr. B. Rush, Mrs. Hodge had two jewels, who were the hope of her life, and the objects of her love. She determined, like Mrs. R. and Cornelia of old, to make all other considerations yield to the education of her two boys; both of whom, it is well known, have amply repaid her toils and care. The one is a distinguished professor in Princeton College, and the other the subject of the present sketch.

Dr. H. graduated after going through a thorough academical and collegiate course of education (and, oh! how much does this early training assist the aspirant to literary honors in after years), in 1818, in the school in which he is now one of the brightest ornaments. It is said that the smiles of practice were long withheld from the modest young doctor, and fifteen long years passed ere he could afford to mount a horse and carriage. Think of this, ye ambitious and restless American youth. Greatness grows by slow degrees.

He became early associated with the band of young men who flocked around Dr. Chapin, in the celebrated "Philadelphia Medical Institute," and lectured upon surgery. It will be remembered that Velpeau and Burns first made their reputation in obstetrics. Dr. H. commenced making his in surgery. After many years labor in this Institution, and attending to such practice as came to him, he, with Wood and Jackson, was elevated to a chair in the University. Immediately, the splendid dwelling owned and occupied by Prof. Cox, was purchased, and horses and carriages, &c. &c., were added, so that the poor orphan boy would now scarcely be recognized by any of his boyish playfellows, as he sweeps along in a noble carriage drawn by fat, sleek, cream-colored horses. His professional income is perhaps not exceeded now by that of any other practitioner in Philadelphia. He is a member of the Presbyterian church, and before the public, and in private, sustains, in all its relations, without a whisper to the contrary, the character of a consistent christian. His church duties are as regularly attended to, as the profession which he practises will permit; and the Sabbath-evening addresses, delivered by a number of distinguished clergymen of different denominations to medical students, are punctually attended by him. He, in fact, seems to delight to associate with his class, in their Sunday-evening devotions—and doubtless feels, as he really appears, like a father among his beloved children. His scientific acquirements are of the highest order. His explanation of the duplicatures of the peritoneum, is the one annually expounded in his own and other schools in our city. Having studied with the father of American obstetricy, Dr. Dewees, whose biography he has drawn, and published in a volume by Dr. Wil-

liams, he imbibed all the enthusiasm of his great master for the obstetric art. His teachings consequently partake of the clearness and conciseness of Dr. D., and although he does not venture so much on extemporaneous speaking as his illustrious predecessor, yet the systematic clearness of his lectures makes a lasting impression upon his class; he is, in the language of one of his colleagues, a "man that will wear."

About five feet seven inches high, with curly hair brushed upwards and backwards on his head, gold spectacles for his great near-sightedness, a spare body, a serious gait, rather long nose, and a voice perhaps a little sepulchral, he is well calculated to make an impression, and a serious one, upon the class and the public. The wags of the class—and what class is without this necessary appendage to a well-constituted medical school?—say that they feel, when he enters the lecture room, as if the first words which they would hear, would be, "let us pray." This is certainly not the effect produced by the entrance of some other of the distinguished teachers whom Cato has named. One, he was told the other day, moved like Atlas, as though the fate of the whole stellar system depended on the precision and propriety of his movements, while the distinguished rival in obstetrics, Dr. H., as has been seen, makes a very different impression. A sweet smile, exhibiting some beautiful natural teeth, with a peculiar twinkling of the eye, indicate a spirit within capable of appreciating a joke, and a good and benevolent disposition.

Dr. H. enters into nothing of general interest to the community, except his church duties. Without the brilliancy of some of his compeers, or the varied literary attainments which are exhibited by others, like the gaudy ribbons of an uneducated girl, he is yet solid and polished; retaining and teaching all that is best in his particular branch. With a beautiful moral character, he, and it is an uncommon association, exhibits at once the character of an exemplary christian, and a scientific gentleman. This peculiar balance in moral and intellectual attainments, presents to us, in him, a combination, beautiful as it is rare. No bigot, no sectarian, in the better sense of the word no theorist, no follower after other men's fancies, no panderer for popularity, no unholy pursuer of gain, he stands a monument of the pure christian physician. We may, perhaps, quote the words of Pollock, and say, in conclusion :—

"Most truly great, his intellectual strength
And knowledge vast, to men of lesser mind
Seemed infinite; yet from his high pursuits,
And reasonings most profound, he still returned
Home, with an humbler and a warmer heart.
As none so well his awful majesty
And goodness comprehended; or so well
His own dependency and weakness knew."

CATO.

FEMALE PHYSICIANS.

[THE following is an extract from a letter to the editor, written by a lady who has for several years been favorably known among us as a public lecturer to women on medical subjects. Whatever may be thought of

the proposed plan of educating females for medical practitioners, and of having both sexes instructed in the same schools, the reader cannot fail to admire the honest enthusiasm of the writer in advocating it.]

Women throughout the country, such I mean as *think*, and have presumed that they had the right to do so, for themselves, are resolved to have those who are to be admitted into the sanctums of their sick rooms in the hour of their deepest trials, those of their own sex. And can they be blamed for a feeling so natural and pure in itself as this? No one who reasons from his own most delicate feelings will dispute the point. Man requires man's aid in his sick room, even when the gentler offices are performed by woman. Why, then, should not woman, who from her organization intuitively understands the throes of agony that her sister endures, not be the one to administer to her the healing draught? She knows also the moan of the sick nurseling, and her heart dictates before the head has time to act.

I am prepared to speak confidently, from the experience that over four years' lecturing to women has given me, together with having given advice to over three hundred women, many of whom would have gone down to an early grave, such was the shrinking delicacy of their feelings, ere they could have spoken to a man of the nature of their sufferings.

Women *will be* physicians. The time has come for it, and neither art nor power will prevent it. Woman has never yet been foiled, when her heart was set upon a great object. If our eyes are put out, and our hands cut off, we are educating our sons and daughters, and we will teach our daughters to pray for eyes as soon as they can lisp. We do not ask or wish separate colleges, and there needs no argument to prove that in other sciences separate institutions are not needed; then why should the holiest, purest study taught to man be sexualized?

Our sons and brothers need the restraining, the purifying and elevating influence of women, when they go from home influences to the corrupting ones of the city. And it may be, that the lecturers themselves would find it salutary to have women present. A professor once said to me that he could not possibly give certain lectures if I were present. This gentleman was in no way remarkable for his delicacy. Of another professor, in the same city, I asked the privilege of attending his lectures. He assured me it was impossible; that such was the state of morals among the students, that I would not be safe from insult, and that I would need the police to protect me. Not being fond of riots or conspicuousity, I pressed the matter no farther. But I was deeply pained, for in a few months these young men would have their diplomas, and go away to their future work, and lives would be in the trust of those who were too unprincipled to see and treat a lady with civility in the classroom. Two days after, another professor in the same city invited me to attend his lectures, and I accepted his invitation to some of his lectures, and was treated with all deference—not a look or action to offend the most delicately fastidious, if I except the loathsome one of tobacco chewing. In another college, where I was invited by the president to attend some lectures, I found this last named practice carried to a very great extent; so much so, that I must needs pick my way through the aisle,

and when seated, carefully raise my dress from the floor to prevent its utter ruin. The next day I found the silent admonition had taken effect; there was an improvement, and the students themselves expressed disgust at a practice so offensive to a lady.

I think that it is but just in me to remark, that, as an individual, I have no complaints against the medical faculty. I have ever been treated by them with a generous courtesy, that has made me feel them my friends. The museums of colleges have been opened to me, private libraries and private instruction in dissection, aid and information freely given, for which in the past I have been deeply grateful, and of which, now in my retired life, I retain a most delightful recollection. I do not, and never have wished to practise medicine; but others do, and as a woman I enter into their sympathies, and speak earnestly for them.

Yours truly,

PAULINA WRIGHT DAVIS.

Providence, January, 1850.

TRANSACTIONS OF THE AMERICAN MEDICAL ASSOCIATION—ERROR CORRECTED.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Having just received a copy of the second volume of the "Transactions of the American Medical Association," I notice in it an error which I respectfully request to correct through the agency of your Journal.

In the documents appended to the Report of the Committee on Medical Education, the assertion is made that the communication from the Medical Faculty of Harvard University, in defence of a four months' course of lectures, *had been transmitted* to the Committee of which I had the honor to be chairman; and the paper itself contains a resolution of the Faculty, directing that it should be communicated to them.

Inasmuch as no notice is taken of this paper in the "Report," I feel that by allowing the erroneous impression that the Committee was in possession of the document to prevail, I should be doing an act of injustice to my colleagues and myself, and permit the inference that we were either unable to reply to the arguments adduced by the Harvard Faculty, or else guilty of a want of courtesy in not noticing them.

The facts are, that the paper purporting to have been communicated to the Committee on Education was never seen by the chairman until the volume containing it was published; and if it was submitted to the Committee at all, it must have been while the Association was in session, and at too late a period to admit of its receiving the attention to which it would otherwise have been considered entitled, on account of the highly respectable source whence it emanated.

Respectfully, your obedient servant,

F. CAMPBELL STEWART,

Chairman of Com. on Med. Education of Am. Med. Association for the year 1849.

Quarantine, Staten Island, N. Y., Jan. 22, 1850.

CHLOROFORM—ELECTRICITY.

To the Editor of the Boston Medical and Surgical Journal.

DEAR SIR,—Some months since, I administered chloroform to one of my patients for the purpose of excising several teeth and extirpating their nerves, preparatory to inserting a block of artificial teeth. It required but a small quantity to produce the desired result, and the operation was performed without the least consciousness on her part. A sufficient time having elapsed, without her showing any symptoms of returning consciousness, I applied the usual restoratives, but without success. Ammonia was used internally and applied to the nose—cold water was dashed upon her face—violent exercise was tried, by walking her about between two persons; but all to no effect—it appeared impossible to awaken or arouse her. Her pulse grew more and more feeble, her face was of the paleness of death, her extremities grew cold; and although not easily frightened, I confess I was some alarmed. Among other things that rapidly passed through my mind as seeming remedies, electricity suggested itself to me. I immediately got out my battery, and passed a current through her system, gradually increasing its strength until her husband and myself, who held her by the hands, were fully satisfied that the battery was a *good one*. In a few minutes she began to revive, and in a quarter of an hour she was on her way home, on foot, perfectly recovered—since which time she has felt no inconvenience on account of the inhalation, but has enjoyed perfect health to this day.

Yours, very respectfully,
Boston, Jan. 17, 1850.

H. G. LUTHER, *Dentist*.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, JANUARY 30, 1850

American Medical Association Transactions.—An octavo of 956 pages, making a book of formidable size, gives those who did not participate in the labors of the Association at its last meeting, an idea of the activity, researches and industry of the delegates. If any publication, purely of a professional character, can make a favorable impression in Europe, in regard to medical science and literature in the United States, this work cannot fail of doing it. It is not foreign matter Americanized, but really and truly a native production. On account of the intrinsic worth of many of the articles in this volume, rendering them worthy of a wide range of circulation, we have no doubt that an occasional extract would be gratifying to the mass of our readers, especially those who may not receive copies of the volume, and we therefore propose copying as liberally as space and opportunity permit. The price of this second volume of an intended series, to be continued annually, has already been given in the Journal.

Physiology of Digestion.—A work with this title, by that well-known and popular physiologist, Andrew Combe, M.D., just published by Fowlers

& Wells, New York, is before us. The present volume is a continuation of one published about two years ago, under the title of "The Principles of Physiology applied to the Preservation of Health and to the Improvement of Physical and Mental Education," and its object is to lay before the public a plain description of the structure and uses of some of the more important organs of the human body, and to show how information of this kind may be applied in practical life. It is embellished by engravings illustrating the organs brought into action during the process of digestion, with a table showing the mean time of digestion of the different articles of diet. The matters discussed on the present occasion, says the preface, "relate chiefly to the function of digestion and the principles of dietetics, the degree to which its morbid derangements undermine health, happiness, and social usefulness, and especially the share which they have in the production of scrofula and consumption, as well as of nervous and mental affections. Numerous and popular as works have been on dietetics, and valuable as are many of the precepts which have been taught from the earliest ages, and sanctioned by the approval of every successive generation, it is astonishing," continues the preface, "how little their influence has been and continues to be in changing the habits of those to whom they are addressed." When mankind are governed by reason instead of appetite, they will profit by these teachings. Until then, we fear it will be difficult to effect a very great change in society in regard to diet. However, the cheapness of the present work, and the popularity of the author, are sufficient recommendations for its general perusal; and if those who read will follow the precepts laid down, they will be bountifully rewarded for their labor.

Health and Mortality of Convicts.—It is creditable to the age, that men of influence are willing to raise their voices in behalf a class of human beings who have too long been considered undeserving of the sympathies of philanthropists, and to acknowledge that even criminals, the violators of those laws on which the peace and security of society depends, have claims upon the common charity of the world, even when they cannot be reclaimed from the evil of their ways.

Since the severity of the penal code never reformed a convict in any country, it is the duty of those under whose administration prisons are placed, to provide for all the physical necessities of those under their charge; and among these, the preservation of health is most prominent and important.

At a meeting of the Philadelphia Society for the alleviation of the miseries of public prisons, in April, 1849, a committee was appointed, "whose attention shall be called to the disproportionate mortality and relative length of sentences between the white and colored prisoners, in the prisons under the inspection of the Society." Drs. Isaac Parrish, H. S. Patterson, H. Gibbons, and Mr. E. Townsend, composed the commission, and the report now before us is presumed to have been the labor of Dr. Parrish. The researches of the committee show the curious fact of a higher degree of mortality of the colored than the white convicts, placed under circumstances precisely alike. In the Eastern Penitentiary of Pennsylvania, from its reception of prisoners, 1829, to the close of 1848, 1,631 whites and 790 colored were admitted. Of that number, 73 whites have died; and of the colored, 141. The mortality of the first was 4.50,

while the latter was nearly 18 per cent. At the County Prison, of 2,818 sentenced to hard labor, from its opening in 1835, to the termination of 1848, 155 have died—making 5.50 per cent. of both colors. Of the 2,818, 1,526 were whites, of whom 37 died; and of 1,392 colored, 118 died. Now it appears that at least three fifths of the prisoners are between 20 and 40 years of age. Causes, therefore, say the committee, producing this high mortality, exist within, and not outside the prison wall, as inquiry in regard to the rate of mortality in Philadelphia abundantly proves.

Taking a general average of the length of sentences of the two races, it is quite certain that the colored rogues are more severely dealt with than the white. In 19 years, 2 years 8 months and 2 days was the average duration of the white man's incarceration; while the other had 3 years 3 months and 14 days. If justice can explain the reasons for this difference, it would be gratifying to have it done. The cause of a larger mortality of the colored prisoners everywhere, seems to be, 1st, in the construction of prisons, which shut out the sun's rays. 2d, the impurity of the air in cells. 3d, The trades pursued in most prisons exercise a marked influence on the health of colored convicts. Lastly, we gather from the report the idea that the negro constitutionally requires free, open atmospheric exposure; and no temperature, however comfortable by artificial means, will compare with the sun's rays and the influence of daylight upon their bodies. Their power of resistance to the bad odors, confinement, sedentary employments, restricted motion, &c., is much inferior to that of the whites. Next comes up the question, what course is to be adopted, since the truth is out that the colored man will positively die if he has the rigorous sentence passed upon him that has characterized past judicial proceedings. Here, again, the subject is placed in the hands of philanthropic men, where the discovery of the preceding facts was made.

The committee have collected a mass of statistical information that will certainly be useful to their successors. This business of ameliorating the condition of the wretched prisoner, has a deep, firm hold of the public mind, and much may hereafter be gained for humanity, without weakening the force of law, by simply complying with the teachings of christianity.

Health of West Point Cadets.—Dr. Robert Southgate, Assistant, acting as Surgeon at the Military Academy at West Point, has addressed a letter to the chairman of the Congressional Committee on the police of that institution, that must make the ears of the government students tingle with shame. It is refreshing, in this age of political cringing, to know that one man exists who is not afraid of losing his office by telling the truth. The communication is designed for the special consideration of Congress, and intended to inspire that body with a sense of the importance of preserving the health, morals and discipline of the students at West Point. We shall endeavor to re-publish it the coming week.

Pecuniary Value of Medical Schools.—In Dr. Mitchell's lectures at the Jefferson Medical College, the fact is stated that the schools of medicine in Philadelphia add annually, directly and indirectly, *one million of dollars to the income of the city.* No objections are made by the citizens to

the increase of institutions that give to them such direct thrift. No such trouble attends the petition for another charter in Pennsylvania, as is experienced in other States, where every possible effort is made to prevent the creation of a rival college. The more they have in Philadelphia, the more commanding is the influence of the whole. There is no lack of students—and we are informed that there is quite an army of them the present winter. Let New York and Boston have three or four more schools of medicine, and they would be astonished at the immediate increase of patronage. Whether such an increase would be for the good of the public generally, or of the profession, is wholly another matter.

Pauperism in Massachusetts.—There were 10,253 State paupers last year, in Massachusetts, 9,128 of whom were foreigners. During the last year, 2,043 new ones came over for support, and the industry of the native citizens is doomed to feed them. That is not all—there are almost daily arrivals of more, brought here expressly that the country from whence they came might be rid of them, because they are destined to be a perpetual burden. Like a strong ass, the people bow their necks and sustain the ungracious load. For these paupers and their successors, the advocates of a new hospital in Boston would still further tax the citizens.

Medical Institution of Yale College.—The annual examination at this school took place on the 16th inst. The examining committee consisted of Drs. Sumner (President), Witter, Warner, Tallcot, Holt and Wood, on the part of the Conn. Medical Society; and Profs. Silliman, Ives, Knight, Beers, Hooker and Bronson, on the part of Yale College. Sixteen candidates, after examination, received the degree of Doctor in Medicine: viz. Amos Cranmer Blakeslee, Waterbury, on "Purpura Hemorrhagica." Henry Clinton Bunce, Manchester, on "Asthma." Alpheus Bryant Clarke, New Haven, on "Semeiology." Henry Augustus Collins, New Haven, on "Placenta Prævia." Richard Pierce Evans, Franklin, Ohio, on "Asiatic Cholera." Henry Hawley Foote, Roxbury, on "Variola." Horatio Welles Gridley, B.A., Berlin, on "Morbus Brightii." Dixon Scipio Hall, Montville, on "Erysipelas." Charles Clifford Holcombe, West Granville, Mass., on "Pneumonia." Lewis Raymond Hurlbutt, M.A., New Haven, on "Peritonitis." Henry Lobbell, B.A., Amherst College, Brookfield, on "The relation of Psychology to Medicine." Henry Wyll Edmund Matthews, B.A., Trinity College, New Haven, on "Diet." George Hammond Rogers, Colchester, on "Phthisis." Henry Smith, East Haddam, on "The Leech." Joel Washington Smith, Hebron, on "Epidemic Cholera." William Cook Williams, Manchester, on "Typhus."

It will be seen that all but two of these graduates belong to Connecticut. This peculiarity has not been confined to the late class. We have before alluded to it in the Journal, and also to the fact that most of the graduates take up their abode in Connecticut—a very large proportion of the practitioners of the State being graduates of this school. The character of these physicians, as a body, is sufficient evidence of the faithful medical instruction given in Yale College. Drs. Knight, Ives, Beers, Hooker and Bronson, are men of sterling worth, who have in their keeping the medical reputation of the land of steady habits; and we honor them individually for their straight-forward course, and determination to elevate and dignify the profession of which they are eminent teachers. If they would write

a little more, their influence would live, though they were dead. The organization of the examining committee is here, more than in any other school, in accordance with the plan recommended by the American Medical Association, of separating the board of examination from that of instruction. The committee consists of the six professors of the institution, and an equal number of individuals appointed by the State Medical Society—the President of the Society being *ex-officio* one. He is President of the board, with a vote at all times, and a casting vote in case of a tie—thus giving the balance of power to the Medical Society.

Prof. J. W. Webster.—We omitted to mention, last week, that the Grand Jury of Suffolk County, after several days examination, returned a bill of indictment against Prof. J. W. Webster for the murder of Dr. Geo. Parkman. The mass of evidence collected by the Jury of Inquest was laid before the Grand Jury, but has not been made public. Dr. W. is yet to be arraigned before the Supreme Court, and the time fixed for his trial. Judge Merrick, of Worcester, and Mr. Sohler, of this city, it is understood, are engaged as his counsel.

Medical Miscellany.—Dr. E. R. Smilie, a frequent contributor to this Journal, who has invented several novel and approved surgical instruments, sailed from Boston for California, a few weeks since.—Gutta percha does not answer the purpose for filling teeth, as expected by some enthusiastic dentists.—Dr. John A. Lockwood goes out surgeon, and Dr. Edward Shippen assistant surgeon, of the Sloop-of-War Marion, for the East Indies.—Dr. A. B. Strong is the editor of the American Flora, about to appear in numbers, at three dollars a year, in New York. Illustrated Natural History, also to be issued in numbers, is to be published by Messrs. Green & Spence, in the same city.—The London College of Physicians and Surgeons have decided, that, for the future, the candidates for their fellowship shall pass an examination in Greek, Latin, mathematics and French!—The number of deaths in Philadelphia during the last year was 9,463—an increase of 1,738 over the previous year; 5,035 were males, and 4,448 females.—The mortality of Worcester, Mass., for the year 1849, amounted to 368, against 333 in 1848.—The number of paupers in the New York Almshouse is 1,871, seven-eighths of whom are there from the use of strong drink.

TO CORRESPONDENTS.—Besides the papers on file already acknowledged, there have been received, Dr. Bryan's translation on Amputations, &c., and a communication from Dr. Cook.

MARRIED.—At Washington, Ct., S. Porter Ford, M.D., to Miss Maria N., daughter of R. M. Fowler, M.D.—S. P. Webb, M.D., of Blanford, Mass., to Miss S. E. Angier.—At Honolulu, Dr. Edward Hoffman to Miss L. F. Morse.

DIED.—At Richmond, Va., Dr. John Cullen, one of the faculty of the Medical Institution of that city, distinguished for his high professional and intellectual attainments.—At Chester, Penn., Dr. Samuel Alexander, formerly surgeon in the U. S. Navy, 77.—At Macao, Dr. John E. Brooks, surgeon of the U. S. squadron in the East Indies.

Deaths in Boston—for the week ending Saturday noon, January 26, 68.—Males, 32—females, 36. Accidental, 1—inflammation of the bowels, 1—burn, 1—disease of the brain, 1—consumption, 10—convulsions, 3—cholera morbus, 1—croup, 1—dysentery, 1—dropsy, 2—dropsy of brain, 6—debility, 1—erysipelas, 2—exhaustion, 1—brain fever, 1—typhoid fever, 1—scarlet fever, 3—lung fever, 6—bilious fever, 1—rheumatic fever, 1—hooping cough, 1—disease of the heart, 1—infantile diseases, 2—inflammation of the lungs, 3—marasmus, 3—peritonitis, 1—smallpox, 1—disease of the spine, 1—teething, 2—putrid sore throat, 1—unknown, 1.

Under 5 years, 40—between 5 and 20 years, 7—between 20 and 40 years, 9—between 40 and 60 years, 5—over 60 years, 7. Americans, 35; foreigners and children of foreigners, 33.

On the Use of the Nitrate of Silver in Erysipelas. By JOHN HIGGINBOTTOM, Esq., F.R.C.S., Nottingham.—I have been much interested with the papers of Dr. Charles Hall, in the *Lancet* of August 18th and September 8th, "On the advantages of Nitrate of Silver as a Local Application in Erysipelas." In the commencement, the question is asked, "Is the nitrate of silver of advantage as a local application in erysipelas?" In reply, I wish to state that I have had more than twenty years' experience in the use of that remedy in the disease, and every day I am more fully convinced of its efficacy. During that period, I have attended a great number of cases of erysipelas, many of them extremely severe in their nature; and during that time I have lost only one patient, a middle-aged female, in whom the erysipelas was accompanied with very severe constitutional symptoms, with inflammation of the throat, &c.; and as the patient lived twelve miles from my residence, she could not have the repeated attention requisite in that disease. Only one case has occurred to me in which I had not full control over the inflammation; this was in an elderly female laboring under typhus fever, and who suffered from cerebral symptoms before the erysipelas came on. From the failure of the nitrate of silver in this case, I was led to think that the inflammation had its origin in the membranes of the brain, and that the inflammation spread from thence to the scalp. The patient was reduced to a state of the utmost debility, attended with involuntary evacuations and retention of urine, but she ultimately recovered. With the exception of the two cases mentioned above, I have always had complete control over the inflammation. That this has not been the case in the hands of others I am not surprised, and am convinced that the different opinions with respect to the efficacy of the application have arisen from the imperfect or improper mode of applying the remedy. Some have touched the inflammation with the point of the pencil, almost fearing that the nitrate of silver should come in contact with the disease, instead of applying the whole side of the stick, or the concentrated solution, which is more convenient, on the inflammation and surrounding healthy skin. Others have applied it around the inflammation as a barrier, without touching the inflamed part with it—or, on the contrary, have applied it to the inflamed part only, without using it on the healthy surrounding skin. Some apply a weak, inefficient solution, instead of the concentrated or the solid stick; and others, again, apply it properly, but do not follow up the application, if the inflammation should spread afterwards.

It is now more than twenty years since I published the second edition of my essay on the use of the nitrate of silver; and the experience I have had since that time having fully confirmed the opinion I then entertained of the value of that remedy, it is my intention, in a short time, to write a sequel, with fuller directions as to its application, not only in erysipelas, but in many other affections in which I have proved its efficacy, and have had the satisfaction of finding it eminently successful.—*Lond. Lancet.*

Hydropathy and Cholera.—The able German correspondent of the *Medical Times*, states, in the number of that Journal for Oct. 27th, that the hydropathists have suffered most severely from cholera. "They inundated the newspapers with the wondrous results of hydropathy, and their mode of treating cholera; but alas! not less than eight of their number died of that disease."—*Philad. Med. News.*

